

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. FILING DATE

APPLICANT(S)

10/049719

CLAIMS

AS FILED	AFTER		AFTER		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	1st AMENDMENT	2nd AMENDMENT						
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1008 (3-70)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. GOVERNMENT PRINTING OFFICE: 1950 14-1000-1000